

Occupational Health: Team Screening and Monitoring



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Learners will be able to:

- Describe the role of Occupational Health in ESP Management
 - Occupational Health's Role before Treatment
 - Occupational Health's Role during Treatment
 - Occupational Health's Role in guiding workers returning from West Africa
- Identify methods of post-activation monitoring
 - Roles and responsibilities
 - Electronic and manual approaches

Forming the Team

Identifying Staff

- Physical Demands
- Mental Demands
- Technical Skills

Volunteer Teams vs. Frontline Staff

- Application and interview process
- Minimum criteria
- Education & inclusion



Pre-Hire Physical

- Comprehensive Health Screening
- Comprehensive health history and brief physical
- Identify potential health risks
- Evaluate tolerance to work conditions while wearing a PAPR and/or N-95 mask
 - Consider PFT
- Work clearance notification sent to Highly Infectious Disease unit manager for review

Occupational Health's Role During Activation

- Conduct an Occupational Health Inventory of EVD Providers wearing a PAPR and/or N-95 mask
- Monitoring of EVD Providers: Temperature and Symptom Monitoring
 - Coordinate with Public Health: local, state and federal
- Management of staff potentially exposed to EVD



Implement an employee monitoring process which provides:

- Twice daily temperature and symptom reviews are completed with 100% compliance
- An electronic reporting system to make compliance easier for the HCW's and the case management more manageable
- Methods to reach and communicate with Occupational Health Services at all times
- Creation of a culture of trust so that HCW's are forthcoming with any possible breach in PPE or hazard experienced, no matter how minor the incident

Management may differ by institution.

Local Health Departments may perform the HCW monitoring for you but there should be an escalation process that is clearly defined for non-compliant HCWs.

Sample of a HCW Symptom Questionnaire



Direct Health Care Provider (including Lab Personnel and Anyone Managing the Waste Stream) Symptom Questionnaire (EVD)

Name _____

Employee ID # _____

Date _____ Time _____

Cell phone number (best contact #) _____

Temperature: _____ degrees C/F If yes, onset and duration

Nausea/Vomiting:

Diarrhea:

Headache:

Joint or Muscle Aches, or both:

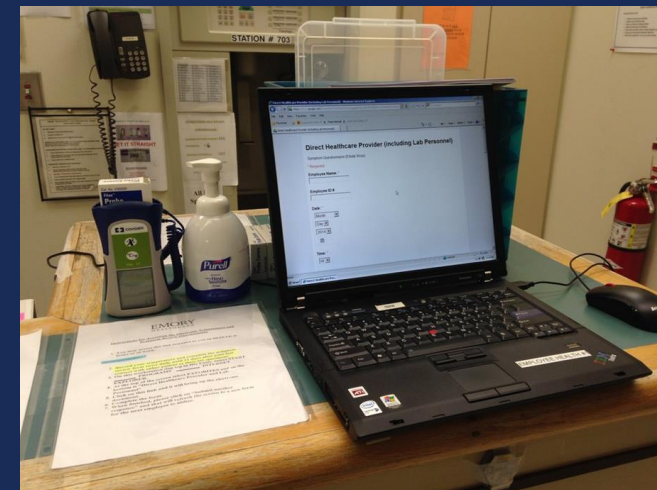
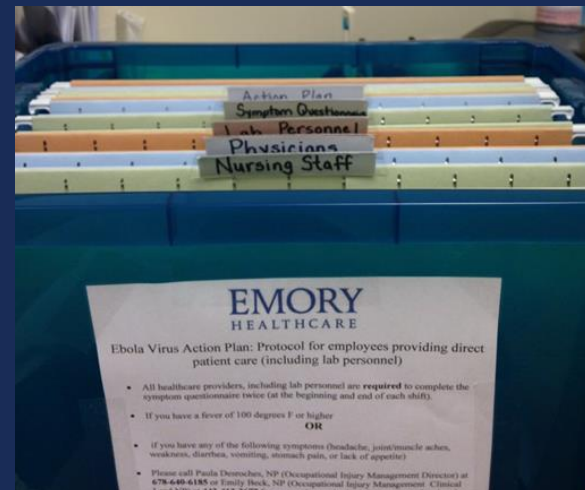
Stomach Pain:

Lack of Appetite:

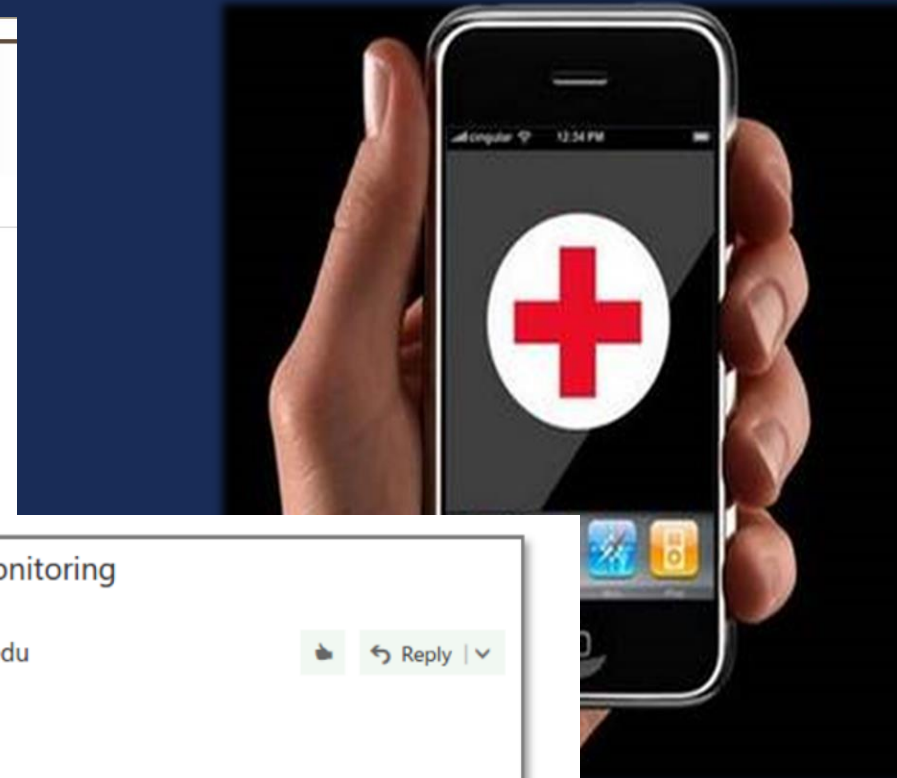
Weakness:

Evolution of Symptom Questionnaire and Temperature Monitoring

- Began as a Word Document Form (Paper) with individual files for each staff member
- Data dumped into one large spreadsheet sorted by the occupational health team
- Current:
 - Emory customized People Soft for Symptom Monitoring Tool
 - Nebraska customized Redcap application with local public health
 - Bellevue works with the local Health Department via electronic database



Leveraging Technology



ALERT from Ebola Caregiver Monitoring



caregiver-monitoring@unmc.edu

Today, 9:50 PM

Gleason, Michael J



Reply | v

Symptoms present for case #6 (TG3).
Contact #: 4025551212, 4025553434
Symptoms: 102.1 F; Nausea; Vomiting; Headache;
Other symptoms or notes written:
Eye pain
Chills
Sore throat

Please login to REDCap for details.

https://unmcrcdcap.unmc.edu/redcap/redcap_v7.4.2/index.php?pid=1391

HCW Exposures to EVD

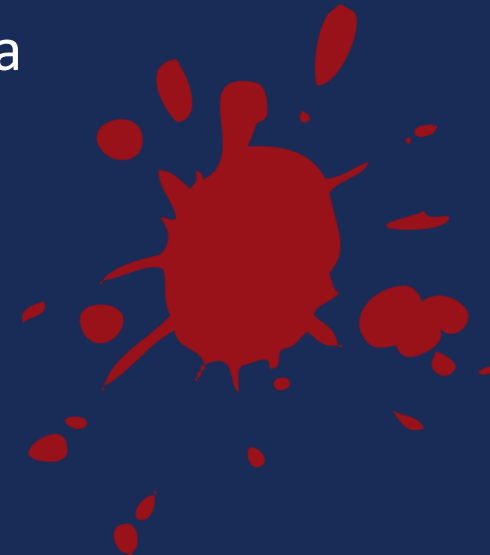
Generally, HCW are classified by the CDC as Low (but not zero) Risk when donned in proper PPE.

- CDC standard: Direct contact with a person sick with Ebola in the US while wearing PPE correctly



HCW High Risk Exposures to EVD

- Health care workers suffer high risk exposures to EVD when:
 - Providing care to a confirmed EVD patient while not donned in proper PPE
 - Handling or processing EVD patient specimens or waste while not donned in proper PPE
 - Despite donning proper PPE, experiencing a needle stick
 - Despite donning proper PPE, experience a mucous membrane exposure to a patient's bodily fluid

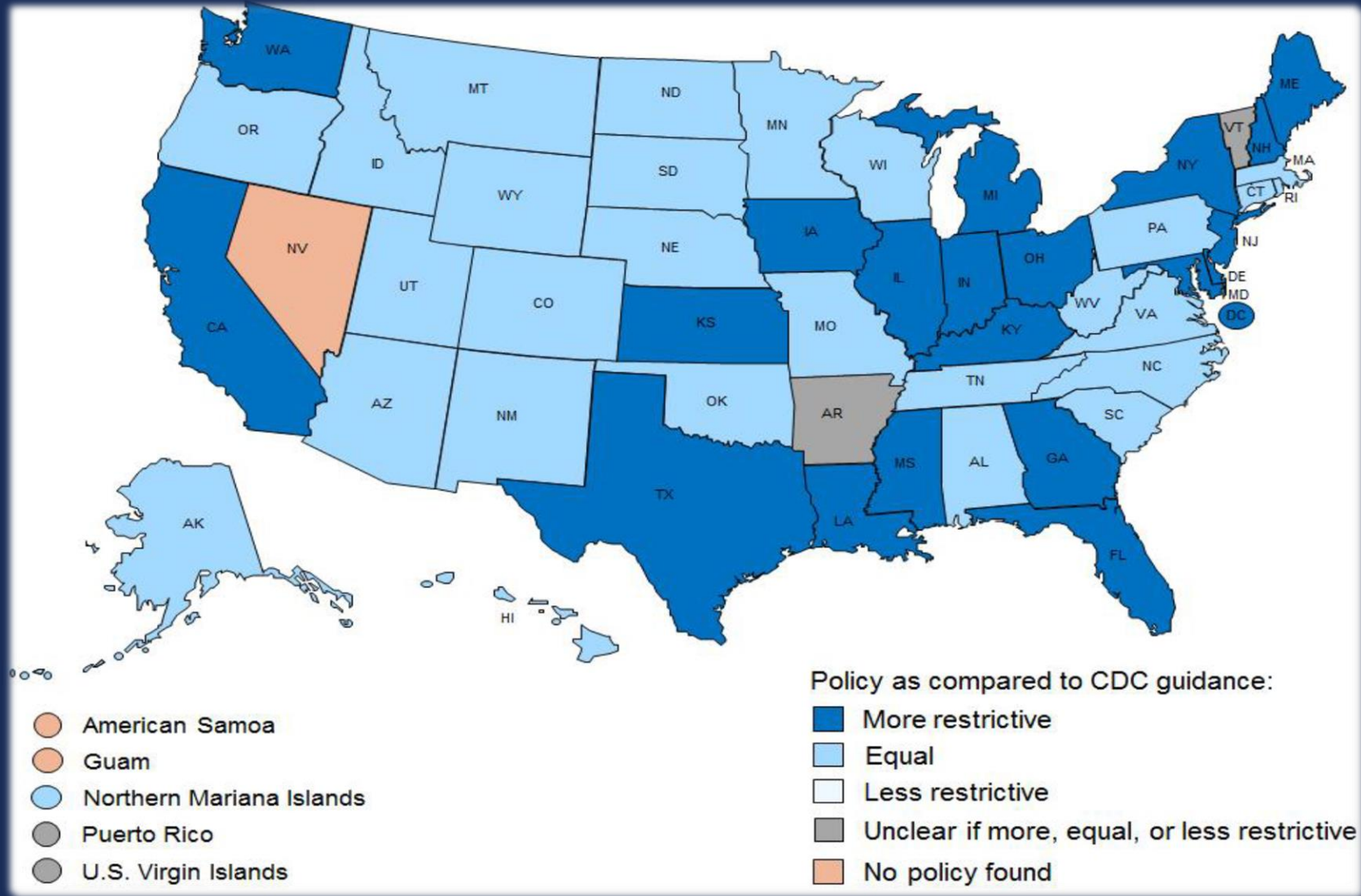


Risk Assessment for Exposure to Ebola Virus

- Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids from an EVD patient?
- Direct skin contact with skin, blood or body fluids from an EVD patient?
- Processing blood or body fluids from an EVD patient without appropriate PPE?
- Healthcare personnel in facilities providing care to EVD patients without recommended PPE?

If “Yes” to any BBP exposure, Alert Highly Infectious Disease Leadership for counseling and consideration for work furlough including twice daily temperature monitoring and symptom reviews until 21 days post this exposure. I.D. would make the determination if PEP (Post Exposure Prophylaxis) is indicated. This exposed employee must submit an Incident Report.

Monitoring Policies for Asymptomatic Individuals



Guidance to Staff Returning from Travel



- **Subject:** Guidelines for staff and physicians traveling to West Africa
- **This email is sent on behalf of Occupational Health Services**
- Dear Staff and Physicians, As the Ebola outbreak in West Africa continues, we want to remind you of the procedures put in place in August to mitigate exposure of those coming to our facilities. While the CDC considers Ebola to pose little risk to our country at this time, individuals traveling to the countries where Ebola cases are occurring may be at risk for exposure. Therefore, we have put in place the following **protocol for all faculty, staff and students who have recently traveled to or are planning to travel to Guinea and Sierra Leone (Note: The at-risk regions listed has changed since the communication sent in August).**
- **Who to Contact Upon Return**
- **Faculty and Staff:** Prior to returning to work after travel, faculty/staff should contact Occupational Health Services for counseling.
- **Students:** Prior to returning to campus/classes, students with recent travel to the countries listed above should contact Student Health Services' for counseling.
- **Procedures for 21 Days:** Faculty/staff and students should check their temperature and report any symptoms, including headache, joint/muscle aches, weakness, diarrhea, vomiting, stomach pain or lack of appetite once daily from the first day of their return from travel and for 21 days thereafter. For a complete list of Ebola symptoms, visit the CDC website. In the event of onset of a fever of 100 degrees or higher or any of the symptoms listed above, DO NOT REPORT TO WORK OR SCHOOL.
- **Procedures if You Are Symptomatic:** Symptomatic faculty/staff should contact Occupational Health Services, immediately at the phone numbers above for further guidance.
- **Symptomatic students** should contact Student Health Services immediately at the phone numbers above for further guidance.
- Thank you for your commitment to providing a safe environment and to your personal well-being.

- Electronic
- Confidential
- Ease of Use- Access from Smart Phone
- Email Alerts for any “yes” symptom or temperature recording of 100 F or higher
- Queries to pull data quickly

“We can fear, or we can care.”

Susan Mitchell Grant, RN, chief nurse for Emory Healthcare, Washington Post, August 6, 2014



